## Instructions to complete the Authorization for Disclosure Form

## Line #

- 1. Name, Social Security Number and Date of Birth of Employee.
- 2. List specific information you want released to an individual.
- 3. Name of individual you want your PHI released to.
- 4. Relationship the individual is to you (i.e. spouse, child, etc.).
- 5. Give mailing address of the individual receiving your PHI.
- 6. List what the information will be used for.
- 7. Give a password that will be used to identify the individual when they call.
- 8. Give a hint for the password in case the individual forgets what the password is.
- 9. Give a date for how long you want the Authorization to be good for.
- 10. Sign and date the form.
- 11. Give your mailing address.